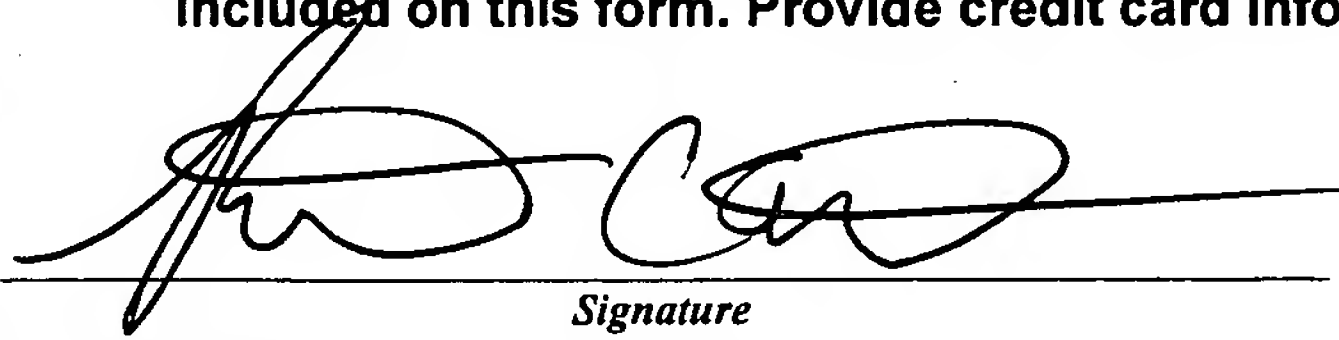
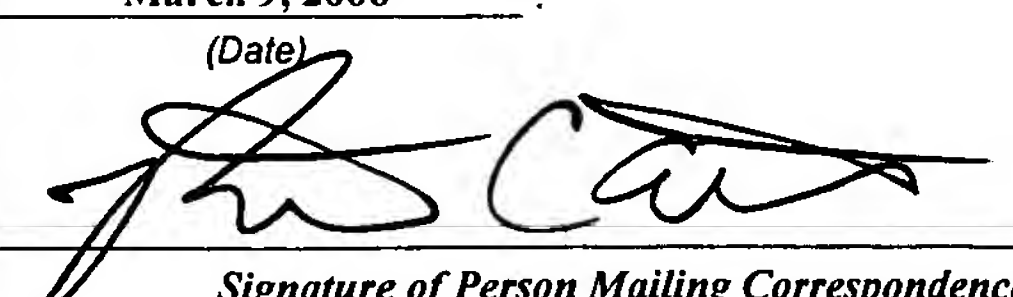


Ifw

AMENDMENT TRANSMITTAL LETTER (Large Entity)					Docket No. LASP:129US																																											
Applicant(s): Kyra MOELLMANN																																																
Application No. 10/604,636	Filing Date Aug. 6, 2003	Examiner WILLIAMS, D.	Customer No. 24041	Group Art Unit 2878	Confirmation No. 1635																																											
<div style="float:left; border:1px solid black; border-radius:50%; padding:10px; text-align:center; width:150px; margin-bottom:10px;">OFFICE OF INVENTION MAR 13 2006 PATENT & TRADEMARK OFFICE</div> <div style="clear:both"></div> <p style="text-align:center">BRIGHT SOURCE FOR THE ILLUMINATION OF MICROSCOPIC SPECIMENS, AND SCANNING MICROSCOPE SYSTEM</p> <p style="text-align:center"><u>COMMISSIONER FOR PATENTS:</u></p> <p>Transmitted herewith is an amendment in the above-identified application. The fee has been calculated and is transmitted as shown below.</p> <table border="1" style="width:100%"><tr><th colspan="7">CLAIMS AS AMENDED</th></tr><tr><th></th><th>CLAIMS REMAINING AFTER AMENDMENT</th><th>HIGHEST # PREV. PAID FOR</th><th>NUMBER EXTRA CLAIMS PRESENT</th><th>RATE</th><th colspan="2">ADDITIONAL FEE</th></tr><tr><td>TOTAL CLAIMS</td><td>16 -</td><td>20 =</td><td>0</td><td>x \$50.00</td><td colspan="2">\$0.00</td></tr><tr><td>INDEP. CLAIMS</td><td>2 -</td><td>3 =</td><td>0</td><td>x \$200.00</td><td colspan="2">\$0.00</td></tr><tr><td colspan="5">Multiple Dependent Claims (check if applicable) <input type="checkbox"/></td><td colspan="2">\$0.00</td></tr><tr><td colspan="5" style="text-align:right">TOTAL ADDITIONAL FEE FOR THIS AMENDMENT</td><td colspan="2">\$0.00</td></tr></table> <div style="margin-top:10px"><input checked="" type="checkbox"/> No additional fee is required for amendment. <input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____ <input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed. <input checked="" type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account 50-0822 <div style="margin-left:20px"><input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16. <input checked="" type="checkbox"/> Any patent application processing fees under 37 CFR 1.17.</div><input type="checkbox"/> Payment by credit card. Form PTO-2038.</div> <p>WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</p> <div style="display:flex; justify-content:space-between; align-items:flex-end; margin-top:20px"><div style="width:45%; text-align:center"> <i>Signature</i></div><div style="width:45%; text-align:right">Dated: March 9, 2006</div></div> <div style="display:flex; justify-content:space-between; margin-top:20px"><div style="width:45%; border:1px solid black; padding:5px;">Robert C. Atkinson Registration No. 57,584 Simpson & Simpson, PLLC 5555 Main Street Williamsville, New York 14221 Telephone No. 716-626-1564 Facsimile No. 716-626-0366</div><div style="width:45%; border:1px solid black; padding:5px;"><p>I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to "Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450" [37 CFR 1.8(a)] on</p><p style="text-align:center">March 9, 2006 <small>(Date)</small></p><div style="text-align:center"> <i>Signature of Person Mailing Correspondence</i></div><p style="text-align:center">Robert C. Atkinson <i>Typed or Printed Name of Person Mailing Correspondence</i></p></div></div> <div style="margin-top:10px"><div style="float:left; width:45%;">cc:</div><div style="float:right; width:45%; text-align:right;">P11LARGE/REV09</div><div style="clear:both"></div></div>							CLAIMS AS AMENDED								CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE		TOTAL CLAIMS	16 -	20 =	0	x \$50.00	\$0.00		INDEP. CLAIMS	2 -	3 =	0	x \$200.00	\$0.00		Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00		TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$0.00	
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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicants: **K. MOELLMANN**

U.S. Patent Application No. **10/604,636**

Filed: **August 6, 2003**

Examiner: **WILLIAMS, D.**

Group Art Unit: **2878**

Confirmation No.: **1635**

Customer No.: **24041**

For: **LIGHT SOURCE FOR THE ILLUMINATION OF MICROSCOPIC
SPECIMENS, AND SCANNING MICROSCOPE SYSTEM**

AMENDMENT AND REQUEST FOR RECONSIDERATION

Mail Stop Amendment
Commissioner for Patents
PO Box 1450
Alexandria, VA 22313-1450

Honorable Sir:

This Amendment and Request for Reconsideration is being filed in reply to the Office Action dated December 27, 2005. Support for this Amendment and Request for Reconsideration of the above-identified application is as follows:

Amendments to the Claims are reflected in the listing of claims which begins on page 2 of this paper.

Remarks/Arguments begin on page 5 of this paper.

Certificate of Mailing by First Class Mail

I certify that this Amendment and Request for Reconsideration is being deposited on March 9, 2006 with the U.S. Postal Service as first class mail under 37 C.F.R. §1.8 and is addressed to the Commissioner for Patents, PO Box 1450, Alexandria, VA 22313-1450.

Robert C. Atkinson
Reg. No. 57,584